FOR INSTRUCTIONS, SEE BACK OF FORM

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

400.00	2.722.70	 17.5 - 1		
-	4	 	3.	
	ese			

DISCLOSURE SUMMARY PAG	Reset F	DD 4	
COMMITTEE NAME (Must be same as on Statement of Organization		(Rev. 12/2005) DISCLOSURE	
Jack Drake for State IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candid Political Subdivision Candidate (8) County PAC (9) City PAC (10) Subdivision PAC (11) Local Ballot Issue  CANDIDATE COMMITTEES ONLY:  Candidate Name  Jack Drake  Office Sought  Representative  Late reports are subject to possible civil and criminal penalties. Pursuate candidate, for a candidate's committee, and the chairperson, for a individual responsible for filing timely and accurate reports.	2)State PAC (3)State Party date (7)School Board or Other )School Board or Other Political  Political Party (if applicable)  Republican  District (if Senate or House)	Scanned Computer Audited  File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-3701	
Shirley J. Drake	712-784.	<b></b>	
SIGNATURE OF/PERSON FILING REPORT	TELEPHONE	DATE SIGNED	
(report date)  CHECK IF AMENDMENT TO REPORT DATED  Check if this is final (termination) report and attach Notice of Dissol (You must continue to file reports until a DR-3 is filed.)	Indicate by	Local Committees, enter Date of Election  County & Local Committees, enter County in which Election is held	
STATEMENT	OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period. (Total of all committee. This amount MUST be the same as the cash on of the last reporting period or must be zero if this is first rep	funds held by the hand at the end	\$ 5,007.60	
ADD TOTAL MONEY TAKEN IN THIS PERIOD  School A: Cash Contributions total (Attach Schedule A) ( School B: Loans Received total (Attach Schedule F)  School B: Total Sales of Campaign Property (Attach Schedule F)	edule H)		
(Schedule H applies to Candidates' Committee Schedule H applies to Candidates' Committee Schedule H applies to Candidates' Committee Schedule B: Expenditures total (Attach Schedule B) (**also	SUB-TOTAL		
Scheme F: Loan Repayments total (Attach Schedule F)  CASH ON HAND at the end of this reporting period (if final report balar be zero) (Attach DR-3)	nce must	4400 3.	_
*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	•••••••••••••••••••••••••••••••••••••••	s	_
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES X NO	

## For Instructions, See Back of Form

## Reset Horn

SCHEDULE	
Α	MONETARY
(Rev. 07/03)	RECEIPTS

CHECK THIS BOX IF AMENDING FORM



## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

l .	NAME (Must be same a		_ ,
Jack	Drake for	State	Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1-31-07	ID# CK#	Box 588		\$ 1.01	
	ID#	ROLLING HILLS BANK		7.07	
2-28-07	CK#	Box 588 Walnut, IA. 51577		189	
	ID#	Rolling Hills Bank			
3-31-07	CK#	Box 588 Walnut, IA. 51577		,99	L
11 4	ID#	Rolling Hills Bank			
4-30-07		BOX 588 Walnut, IA. 51577		195	
5-31-07	ID#	Rolling Hills Bank Box 588		0,-	
5-31-07	ID#	Walnut, TA. 51577		195	<u> </u>
6-30-07	,	ROLLING HILLS BANK BOX 588 Walnut, JA. 51577		-86	
51 17	ID#	Bolling Hills Bank			
7-31-07	CK#	Box 588 Walnut, IA. 51577		, 86	
(1 9 1 1 B	ID#	BOXLING WILLS BANK BOX 588			
8-31-07	CK#	Walnut IA. 51577		185	<u> </u>
7-30-07		BOX11.ng WILLS BANK BOX588		177	
, 250 - 7	***************************************	Walnut IA 5/577		2//	
0-26-07	CK# 3049	Towa Committee of Automotive JIII Office Park Rd. Retailers West Des Moines IA 50365		100.00	
		30.463	SUB-TOTAL	\$ 108 13	

TOTAL (if last page of this schedule)

Page / of 2 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## For Instructions, See Back of Form

## Reset Form

SCHEDULE	
Α	MONETARY
(Rev 07/03)	DECEIDTS

### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE	NAME (Must be	same as o	on Statement o	of Organization)
Jack	Drake	for	State	Representative

<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	I RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED	(if applicable)		TO CANDIDATE*	RECEIVED	FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER
	ID#	Rolling Hills Bank			INCOME
		1		\$	
10-31-07	CK#	BOX 588		.80	
	ID# 6098	Walnut, IA. 51577	-		
·	1	Iowa Beu PAC			
11-10-07	CK# 3518	321 E. Walnut - Suite 310		500.00	
	ID#	Des Moines, IA. 50309			
	"	Glenn Grove			
11-13-07	CK#	15279 Pinecrest Dr.		50,00	
	ID#	Council Bluffs, IA. 51503			
	10#	Rolling Hills Bank	}		
11-30-07	CK#	BOX 588		,85	
//-30-07	104	Walnut, IA, 51577		,83	
	ID# 8473	Aguita - Employee Federal PAC	'		
12-13-07	CK# 1982	20 W. 94 Street		200.00	
12-13-01		Kansas City, Mo 64105		200	
	ID# 6058	Jowa Chiropractic Society			
12-21-07	CK# 4155	1605 N. Ankeny BIVD Ste 100		100.00	
7	15"	Ankeny, IA. 50023			
	ID#	ROLLing Hills Bank	İ		
12-31-07	CK#	BOX 588		.93	
		Walnut, IA 51577		-/3	
	ID#		1		
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	<del></del>		CUD TOTAL		

SUB-TOTAL

TOTAL (if last page of this schedule)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.



SCHEDULE В

MONETARY

(Rev. 07/03) **EXPENDITURES** 

CHECK THIS BOX IF AMENDING FORM

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) Jack Diake for Sepresentative CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE ID NUMBER **EXPENDITURE** (DESCRIBE TRANSACTION) **EXPENDED EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# Republican Party of Transfer Funds 621 E. 9th 1-8-07 CK#/207 \$ 365,00 Des Moines, IA 50309 ID# Harlan Newspapers Two year Subscription BOX 721 CK# 1208 5-2-07 for Paper 78.00 Harlan IA. 51537 ID# IWec Foundation Shelby County 27/2-125 CK#1209 5-5-07 sponsor Scholarship 250.00 Harlah, IA. 51537 ID# I wcc Foundation Cass County 705 Walnut St. 260,00 CK# /2 /0 5-5-07 Sponsor Scholarship Atlantic, IA. 50022 ID# Hy Vee Atlantic Beef Certificates 1630E 72 st 50,00 CK# /2 // 7-12-07 for County Fair Atlantic IA. 50022 ID# Harlan Newpapers Sponsor ad BOX 721 CK# /2/2 8-27-07 210,00 Harlan, IA, 51537 ID# KJAN Sponsot ad BOX 389 66.00 9-8-07 CK# / 2/3 for Tournment of Atlantic TA. 50022 champions ID# KJAN Sponsoryads BOX 389 11-6-07 CK# 1214 for Football Playoss 64.00 Atlantic, IA. 50022 SUB-TOTAL 1343.00

TOTAL (if last page of this schedule)

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page	_/	of	2
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	Water Street		278.6.44
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2.20	77.0	Control of	in divide to

# (5)

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

CHEDULE
В
(Rev. 07/03)

MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

Jack	Drake	for State Represen	tative	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12-5-07	ID# CK#/2/5	Village Voice Box 10 Elk Horn, IA. 51531	Paper Subscription 14s.	\$ 22.00
12-5-07	ID# CK# /2 /6	US Postmaster 4214 Main street EIK Horn, TA. 51531	joo stamps	41.00
12-9-07	CK# 12 17	KJAN BOX 389 Atlantic, IA. 50022	2 Christmas ads	64.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID#			

SUB-TOTAL

\$127.00

TOTAL (if last page of this schedule)

1470.00

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

CK#

ID#

CK#

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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